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ABSTRACT

This paper presents a developmental study of social competence in preschool children which examines the relationship of motor competence, egocentrism and demographic characteristics to the development of social competence. Tests of motor skills and role taking ability were administered individually to 54 preschool children ranging in age from 3 years 2 months to 5 years 3 months. A measure of social competence was obtained through classroom observation using the Shapiro and Ogilvie Social Behavior Checklist. School records provided the data for family size, birth order and school experience. Results indicated a positive relationship between motor development and social scores, especially at the lower age levels. Although role taking skills were correlated with social competence, the correlation was negative for children under 58 months of age. These scores tended to converge for children over this age level. Methodological problems with the role taking test are discussed. Other results indicated that birth order and sex were not correlated with social competence. Results did indicate an interactive effect of family size and school experience on social competence. Implications of this research for the nursery school teacher are discussed. (BD)

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Title

Social Competence - A Developmental Approach

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"That girl is sad. She has no friends. I have lots of friends". Four-year old Kathleen made this reply when shown a picture of a child all alone in a dark place and asked to comment on how the child felt. Basic needs such as parents, light, food, toys were lacking in the picture but the most important deficiency to Kathleen was the lack of friends.

Both parents and teachers agonize when they see children socially isolated or actively rejected by their peers. Researchers have demonstrated that accepting peer relations for children correlate with later adjustment. For example, the child with low peer acceptance is more likely to drop out of school (Ulman, 1957) and have mental health problems later in life, than the child with higher peer acceptance (Cowen, Pederson, and Babigan, 1957). Peer sociability at two and one-half years of age is related to peer sociability at seven and one-half years of age (Waldrop and Halverson, 1975). These findings concerning early peer interactions are of vital importance to early childhood educators and parents.

Moore (1967) identified some behavioral characteristics of unpopular preschool children. Most of these behaviors were negative responses to peers--ignoring, blaming, and refusing to co-operate with peers or more openly aggressive behaviors such as demanding, annoying and physical attacking. Many nursery school teachers can attest to the fact that these behaviors characterize the unpopular child.

In addition to these behavioral characteristics, low peer acceptance children seem to have other characteristics that set them apart from their more successful peers. The idea for this particular study grew from observations of unpopular children in a Columbus, Ohio nursery school. Some of these unpopular children exhibited difficulty in performing motor

tasks such as walking up and down stairs on the way to the playground. Furthermore, they seemed to have some cognitive delays such as an inability to understand another person's point of view. This trait is especially noticeable during dramatic play. For example, Michael, age four, in an attempt to join three other children who were engaged in "Bionic man" dramatic play, announced that he would be Mickey Mouse. Needless to say, he was rejected by his peers because of his inability to understand their theme for dramatic play. Perhaps the developmental differences that these low peer acceptance children exhibit contribute to their low social competence.

During the last decade, research concerned with preschool social competence has indicated a blurring in the distinction between social, cognitive and motor development for the young child. These factors influence one another so that the young child functions as an integrated whole. One socio-cognitive skill that has been identified as crucial for effective interpersonal relationships is role taking (Flavell, 1968), i.e., the ability to understand certain aspects of another person. Some interpretations of Piaget's theory of cognitive development support the idea that preschool children are unconsciously egocentric and unable to take another's viewpoint. However, Flavell devised some simplified tasks to show that children have acquired rudimentary role taking skills by the end of the preschool years.

This investigation was designed as a developmental study of social competence emphasizing the interrelatedness of social, cognitive, and motor development. The purpose in the study was to examine the relationship of motor competence, egocentrism and demographic characteristics to the development of social competence in preschool children. Egocentrism was

defined as role-taking skills. Demographic characteristics studied included family size, birth order, extent of nursery school experience, age and sex.

The Sample

Children enrolled in a Bexley, Ohio preschool during the 1976-77 school year were selected as subjects for this study. The preschool, located in a church, is financed through tuition along with assistance from the sponsoring church. Children, three to five years of age, are enrolled in the preschool for two, three or five mornings per week. Of the 67 children enrolled in the school, 57 (85 percent) received parental consent to participate in the study. Two of these were eliminated because of their anxiety in the test situation and a third was eliminated because of a diagnosed learning disability. Of the 54 children remaining, 23 were male and 31 were female. Their ages aranged from three years and two months to five years and three months. More than one-half of the subjects were four-year-olds. Sixty-two percent of the subjects were from 2 children families, and 58 percent of the subjects were first borns. Forty-seven percent had one to one and one-half years of prior nursery school experience. The largest group in the study was four-year-old, first born females from families with 2 children.

The Procedure

Each child was tested individually in a small carpeted room located on the floor above the classrooms. Because the experimenter was the director of the preschool, and therefore, familiar to the children, stranger anxiety was minimized when children were asked to leave their classroom to be tested. In addition, a child was not tested unless his/her teacher had determined that the child was having a "typical" day. One of the more

cooperative children in each group was chosen first so that the other children could see that going with the experimenter to be tested was a positive experience.

The first test administered to the children was one of motor development. The experimenter chatted with the child for a while and offered some raisins to put the child at ease. The child was then asked to perform 26 fine and gross motor tasks that appear on the Denver Developmental Screening Test (Frankenburg and Dodds, 1967) that are typical for children between the ages of two and six years. These tasks were given randomly to each child with an attempt to begin with those activities that might appeal to that child. For example, the tricycle riding task was one of the first tasks chosen by many of the subjects. The motor testing was usually completed in 10 minutes. The children found these tasks so enjoyable that months after the testing was completed, quite a few children asked to "go upstairs and play again." A numerical motor score was given to each child based on points for each task that the child could perform and how this score compared to the scores of other children in his/her age group.

After completion of motor competence testing for all subjects, the experimenter administered a test of role taking to each child in the same experimental setting. In this study, role taking was defined as the egocentrism, i.e., subject's ability to understand another person's feelings in a variety of situations. The child was instructed as follows: "I have some pictures and stories to show you. I am really interested in the way people feel - if they are happy, sad, mad, or afraid." Fifteen stories accompanied by pictures devised by Urberg and Docherty (1976) were given randomly to each child. The child was asked to identify the story character's feelings. A typical story would be: "This child just

got a present. Is she/he happy, mad, sad, or afraid?" Some stories were more difficult than others and required the child to make inferences about the affective states of two characters in the same story. The children were given numerical role taking scores based on correct identification of the story character's affective state and a logical justification for their answers.

The final step in the data collection process was an assessment of each subject's level of social competence. Each child was observed unobtrusively for one-half hour during free play in either the classroom or the indoor or outdoor playground. The preschool groups had an average of 15 children with 2 teachers. Both the classrooms and playgrounds were arranged in identical open classroom style with equipment accessible to the children.

After the classroom teacher determined that the child was having a typical day, the child's behavior with both peers and teachers was scored using the Social Behavior Checklist (Shapiro and Ogilvie, 1969). The checklist was based on eight social competence behaviors that are characteristic of well-developed preschool children. These behaviors included:

1. to get and maintain the attention of adults in socially accepted ways
2. to use adults as resources
3. to express both affection and hostility to adults
4. to lead peers
5. to follow peers
6. to compete with peers
7. to show pride in accomplishments
8. to express a desire to grow up (adult role play).

When the half hour observations for all the children were completed, a social competence score was calculated for each child. This score was based on points for favorable ratios of positive to negative and successful to unsuccessful behaviors. Each of these raw scores were then compared to other children's social scores in the same age group.

Information about the subject's family size and birth order was obtained from school records while information about the extent of their nursery school experience was obtained from a questionnaire filled out by parents.

After all the data were collected, an analysis of covariance was performed in order to determine if variability of social competence was related to the children's motor competence, egocentrism (role taking ability), family size, birth order, age and sex. The questions asked, along with the answers indicated by the data analysis, are presented in the following section.

Results and Discussion

1. Is motor competence related to social competence in preschool children?

The data analysis revealed that as motor scores increased for the children, social scores also increased. This was especially true for children in the low nursery school group (less than one year of nursery school experience). For this group, every unit increase in their motor scores produced an increase of .67 in their social scores. These results indicate that motor competence does contribute to social competence in preschool children. This is consistent with classic research supporting the notion that social status is usually given to children who perform above average on various physical tasks (Goodenough, 1930). It is not clear as to why motor competence is more important to the social competence

children with limited nursery school experience than to that of children with extensive nursery school experience. Perhaps children with low social competence compensate for their lack of experience in groups of young children by fully developing their motor skills.

The use of the Social Behavior checklist produced clear distinctions in social competence among the children tested. Socially competent preschoolers exhibited a wide range of social behaviors while less socially competent children exhibited either very few social behaviors or a preponderance of negative behaviors. The social scores were consistent with the nursery school teacher's informal assessments of the subject's social development.

2. Is egocentrism (role taking ability) related to social competence in preschool children? Role taking, or the ability to decenter and take another person's point of view, correlated significantly with social competence in the nursery school subjects. However, it was not until the subjects reached 58 months of age that role taking began to coincide with social competence. Before 58 months of age, high role taking scores actually contributed to lower social competence scores. For example, while most of the three-year-olds were unable to give logical explanations for their answers on the role taking test, one three-year-old girl was able to do so. She achieved a perfect role taking score. However, this same subject had a very low social competence score. Perhaps because the role taking test required a level of language development that the three-year-olds had not achieved, it was not a true assessment of role taking ability for them.

Some methodological problems were encountered in testing younger children. Thirty percent of the three-year-olds could focus only on an experience that preceded the testing. For example, one three-year-old

gave a running monologue after she heard the word "afraid". She responded, "I'm afraid when Momma spanks my bottom," for all 15 stories. Younger subjects also had difficulty separating one story from the other. For example, one story was told about a character whose father went away on an airplane trip. Over 50 percent of the three-year-olds replied "sad". The next story was about a character who broke a car window with a ball and ran home to father. Then asked how the character felt, several children said, "happy-his/her daddy is back."

3. Does birth order, sex, family size, or nursery school experience contribute to social competence in preschool children ?

The child's birth order ( in this case first, second, or latter born) did not influence his/her social score. Birth order is only one factor influencing the child's personality development and, in itself, probably does not significantly affect the child's social development.

Sex did not influence the child's social competence score. Even though the mean social competence score for girls was 39.5 and 44.6 for boys, the difference was not significant.

The presence of nursery school experience in combination with the child's family size provided further insight into social competence. If the subject were the only child in the family and had little or no nursery school experience, the predicted social score would be 18 points lower than a child from a larger family with more nursery school experience. This is understandable since these only children, having neither siblings nor regular interactions with peers, would have less opportunities for social interaction with other children.

Implications for Teachers of Young Children

Because an available population was used for this investigation, the results cannot be generalized. However, these results allow implications to be made for those who work with young children in the nursery school studies. Socially competent children in this study had higher motor skills, verbal role taking ability after 58 months of age and opportunities to interact with other young children either siblings or peers.

It is an incomplete procedure to consider one aspect of children's development without considering others. Teachers and others who work with young children who have social problems need to ask themselves: Does this child have trouble with motor tasks? Is there an awareness of the views of others? Can the child communicate with others? Have there been opportunities to be with other children?

Motor development correlated with social development for all age levels in this study. Early childhood educators need to have curriculum goals for the young child's motor development as well as his/her cognitive and social development. Further research is needed to assess early childhood environments in terms of motor growth. This is especially important for children who spend most of their waking hours in a nursery school or daycare center.

Teachers and child care workers need to reconsider some of the sexist stereotypes concerning preschool boys and girls. Girls in this investigation were not more socially competent than boys. There still appears to be acceptance of the notion by teachers and parents that preschool girls are further along in their social development because of their superior verbal skills.

Nursery school teachers have a role in fostering an atmosphere where social development can take place. The results of this study support the need for young children to have the opportunities to interact with other young children and to have environments conducive to both large and small motor activities. Role taking skills seem to be developed through frequent encounters with peers and sensitive adults in an environment rich with materials which support the child's play.

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